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_		
_ Chapter you are filing under:		
☐ Chapter 7		
☐ Chapter 11		
☐ Chapter 12		
Chapter 13		Check if this an amended filing
	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12	☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Ernestine	
	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Brown	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Ernestine Loving	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4320	

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Case number (if known)

Debtor 1 Ernestine Brown

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 1900 Wilson Ave., Unit 10 Calumet City, IL 60409 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Cook County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Ernestine Brown

Par	t 2: Tell the Court About Y	our Ba	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	☐ Chapter 7							
		Chapter 11							
		☐ Ch	apter 12						
		■ Ch	apter 13						
8.	How you will pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cash order. If your attorney is submitting your payment on your behalf, your attorney may pay with a creat a pre-printed address.						n, cashier's check, or money	
			I need to pay	the fee in installments. If y		e this option, sign	and attach the Applica	ation for Individuals to Pay	
			•	e in Installments (Official For	,	this option only if	you are filing for Char	oter 7. By law, a judge may	
I request that my fee be waived (You may request is not required to, waive your fee, and may complies to your family size and you are unable to the Application to Have the Chapter 7 Filing Fee					may do so able to pay	only if your incon the fee in installr	ne is less than 150% onents). If you choose t	of the official poverty line that this option, you must fill out	
9.	Have you filed for	□ No.							
	bankruptcy within the last 8 years?	Yes	3.						
			Diatriat	Northern District of Illinois Eastern	\\/hon	1/27/14	Coop number	14-02359	
			District	Division	When	1/2//14	Case number	14-02339	
			District		When When		Case number		
			District		vvnen		Case number		
10.	Are any bankruptcy cases pending or being	■ No							
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	5.						
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.	Do you rent your	□ No.	Go to li	ne 12.					
	residence?	■ Yes	s. Has you	ur landlord obtained an evict	ion judgme	ent against you ar	nd do you want to stay	in your residence?	
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ar	n Eviction Judgme	nt Against You (Form	101A) and file it with this	

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Document Page 4 of 73 Case number (if known) Debtor 1 Ernestine Brown Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 16-21653 Doc 1 Filed 07/05/16 Entered 07/05/16 14:26:53 Desc Main Document Page 5 of 73

Debtor 1 Ernestine Brown

Case number (if known)

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Ernestine Brown** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 □ 200-999 19. How much do vou □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ernestine Brown Signature of Debtor 2 **Ernestine Brown** Signature of Debtor 1 Executed on Executed on July 5, 2016 MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Ernestine Brown

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mehul D. Desai	Date	July 5, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Mehul D. Desai		
Printed name		
Swanson & Desai, LLC		
Firm name		
670 W Hubbard		
Suite 202		
Chicago, IL 60654		
Number, Street, City, State & ZIP Code		
Contact phone 312-666-7882	Email address	kc@chicagobankruptcyattorney.com
6296214		
Bar number & State		

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		Docum	THE TAGE OF THE	
ill in this infor	mation to identify your	case:		
Debtor 1	Ernestine Brown			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	4,530.05
	1c. Copy line 63, Total of all property on Schedule A/B	\$	4,530.05
Pa	rt 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	4,948.96
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	78.45
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	122,838.70
	Your total liabilities	\$	127,866.11
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,407.62
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,108.00
Ра	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other scl	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Ernestine Brown

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

2,392.37 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Tota	al claim
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	78.45
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	67,000.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	67,078.45

Case 16-21653 Doc 1 Filed 07/05/16 Entered 07/05/16 14:26:53 Desc Main Page 10 of 73 Document Fill in this information to identify your case and this filing: Debtor 1 **Ernestine Brown** Middle Name Last Name First Name Debtor 2 Middle Name (Spouse, if filing) First Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chrysler Who has an interest in the property? Check one Make: 3 1 the amount of any secured claims on Schedule D: **PT Cruiser** Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2005 Debtor 2 only Current value of the Current value of the 200000 Approximate mileage: entire property? Debtor 1 and Debtor 2 only portion you own? Other information: ☐ At least one of the debtors and another \$2,475.00 \$2,475.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,475.00 pages you have attached for Part 2. Write that number here.....=>

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

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Debtor 1	Ernestine Brown	Document	Case number (if kno	wn)
Yes.	Describe			
	Couch chairs.	n, chair, bed, nightstand, and a 	a dining room table with 4	\$500.00
□ No	es: Televisions and radios;	s; audio, video, stereo, and digital eq cameras, media players, games	uipment; computers, printers, scanners; mus	ic collections; electronic devices
	Samsu	ung tablet, and 2 flatscreen tvs	S.	\$300.00
Exampl	bles of value les: Antiques and figurines; other collections, memo		pooks, pictures, or other art objects; stamp, c	oin, or baseball card collections;
Exampl No	ent for sports and hobbie les: Sports, photographic, e musical instruments Describe		it; bicycles, pool tables, golf clubs, skis; cand	es and kayaks; carpentry tools;
■ No		ns, ammunition, and related equipme	ent	
□ No		rs, leather coats, designer wear, show	es, accessories	
	Used c	clothing and shoes		\$350.00
■ No □ Yes.		stume jewelry, engagement rings, we	edding rings, heirloom jewelry, watches, gem	s, gold, silver
<i>Exam</i> µ ■ No	oles: Dogs, cats, birds, hors	ses		
■ No	her personal and househ Give specific information		, including any health aids you did not lis	t
		your entries from Part 3, including here	any entries for pages you have attached	\$1,150.00
Part 4: De	scribe Your Financial Assets	s		
Do you ow	vn or have any legal or ec	quitable interest in any of the follo	owing?	Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property

page 2

claims or exemptions.

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26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

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De	ebtor 1	Ernestine Brown		Document	Case number (if known)	
	Examp ■ No	es, franchises, and other les: Building permits, exclu	sive licenses,		n holdings, liquor licenses, professional license	es
		property owed to you?				Current value of the
	oney or p	roperty owed to you.				portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you Give specific information ab	oout them, inc	luding whether you alre	ady filed the returns and the tax years	
	■ No			ısal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	80. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No □ Yes. Give specific information					
	Examp ■ No	Name the insurance compa			HSA); credit, homeowner's, or renter's insurar Beneficiary:	nce Surrender or refund
	If you a someon	erest in property that is dure the beneficiary of a living the has died. Give specific information			od surance policy, or are currently entitled to rece	value: eive property because
	Examp ■ No	against third parties, who les: Accidents, employmen Describe each claim			t or made a demand for payment to sue	
	■ No	ontingent and unliquidate Describe each claim	ed claims of	every nature, including	g counterclaims of the debtor and rights to	set off claims
	■ No	ancial assets you did not Give specific information	already list			
36		_			ny entries for pages you have attached	\$905.05
Pa	rt 5: Des	cribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
		wn or have any legal or equi	table interest i	n any business-related p	roperty?	
	■ No. Go □ Yes. G	to Part 6. o to line 38.				
	_					

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Case number (if known) Debtor 1 **Ernestine Brown** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$2,475.00 57. Part 3: Total personal and household items, line 15 \$1,150.00 58. Part 4: Total financial assets, line 36 \$905.05 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00

\$4,530.05

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$4,530.05

\$4,530.05

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Page 15 of 73 Document Fill in this information to identify your case: Debtor 1 **Ernestine Brown** Middle Name First Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number (if known) ☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exempt
---------	--------------	----------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Couch, chair, bed, nightstand, and a dining room table with 4 chairs.	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Samsung tablet, and 2 flatscreen tvs. Line from Schedule A/B: 7.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Line Horr Schedule A/D. 1.1			100% of fair market value, up to any applicable statutory limit	
Used clothing and shoes Line from Schedule A/B: 11.1	\$350.00		\$350.00	735 ILCS 5/12-1001(a)
Line IIoiii Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Checking: Citibank Line from Schedule A/B: 17.1	\$0.05		\$0.05	735 ILCS 5/12-1001(b)
Line IIoiti Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Rental deposit: Ginger Ridge Apartments	\$905.00		\$905.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 22.1			100% of fair market value, up to	

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	,	adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment
	No	radiation on 4.01.10 and every 8 years after that for eases med on or after the date of adjustment
]	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes

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Case	10 21000	Document P	age 1	7 of 73		idii i
Fill in this information	on to identify you	ır case:				
	rnestine Brow					
Debtor 2	irst Name	Middle Name La	st Name			
	irst Name	Middle Name La	st Name			
United States Bankru	ptcy Court for the	: NORTHERN DISTRICT OF ILLINC	OIS			
Casa number						
Case number (if known)					☐ Check	if this is an
					amend	ded filing
Official Form 1	06D					
		Who Have Claims Se	CUITA	d hy Property	,	12/15
					,	
		If two married people are filing together, bout, number the entries, and attach it to the				
1. Do any creditors have	e claims secured by	y your property?				
☐ No. Check this	box and submit t	his form to the court with your other sch	edules. \	ou have nothing else to	report on this form.	
Yes. Fill in all of	of the information	below.				
Part 1: List All Se	cured Claims					
2. List all secured clain	ns. If a creditor has	more than one secured claim, list the creditor	separatel	Column A y	Column B	Column C
		s a particular claim, list the other creditors in Fical order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	-	doime	value of collateral.	claim	If any
2.1 Automotive C	realt Corp	Describe the property that secures the company of t		\$4,948.96	\$2,475.00	\$2,473.96
		miles				
26261 Evergr	een Road	As of the date you file, the claim is: Checapply.	k all that			
Southfield, M	I 48076	Contingent				
Number, Street, City,	State & Zip Code	Unliquidated				
Who owes the debt?	Check one	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	Chook one.	☐ An agreement you made (such as mort	gage or se	ecured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	2 only	Statutory lien (such as tax lien, mechan	ic's lien)			
At least one of the de		Judgment lien from a lawsuit				
☐ Check if this claim community debt	relates to a	☐ Other (including a right to offset)				
	Opened					
	Opened 11/11 Last					
	Active		0004			
Date debt was incurred	11/03/15	Last 4 digits of account number	6301			
Add the dollar value	of your entries in C	column A on this page. Write that number	here:	\$4,94	8.96	
If this is the last page Write that number he	•	the dollar value totals from all pages.		\$4,94	8.96	
		on a Dabt That Vary Almandry Listed				
		or a Debt That You Already Listed	h4 4h a4	o almos do lista dia Dant 4	F	41
trying to collect from y	ou for a debt you o	pe notified about your bankruptcy for a del towe to someone else, list the creditor in Pa	art 1, and	then list the collection ag	ency here. Similarly, if	you have more
than one creditor for a debts in Part 1, do not		t you listed in Part 1, list the additional cre nis page.	ditors he	re. If you do not have add	litional persons to be n	otified for any
Π						
Name, Number, S	Street, City, State & . Credit Corp	Zip Code	On wh	ich line in Part 1 did you en	iter the creditor? 2.1	
Michael And	rews & Assoc.		Last 4	digits of account number _	_	
26261 Everg Southfield, N	reen Rd. Suite //I 48076	350				

Official Form 106D

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Page 18 of 73 Document Fill in this information to identify your case: Debtor 1 **Ernestine Brown** Middle Name Last Name First Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 **Internal Revenue Service** \$78.45 \$78.45 \$0.00 Last 4 digits of account number 4320 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one ☐ Contingent Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes **2011 Taxes** Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes.

List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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Debtor 1 Ernestine Brown Case number (if know) 4.1 **Acceptance Now** Last 4 digits of account number 2951 \$2,250.00 Nonpriority Creditor's Name Opened 03/15 Last Active 5501 Headquarters Dr When was the debt incurred? 04/16 Plano, TX 75024 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Rental Agreement ☐ Yes 4.2 Advocate Christ Medical CEnter Last 4 digits of account number 3002 \$707.59 Nonpriority Creditor's Name P.O. Box 4256 8/30/2015 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Med Bill Other. Specify 4.3 **Advocate Medical Croup** Last 4 digits of account number 4665 \$360.00 Nonpriority Creditor's Name PO box 92523 When was the debt incurred? 8/30/15 Chicago, IL 60675-2523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Med Bill

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Debtor 1 Ernestine Brown Case number (if know) 4.4 Afni Last 4 digits of account number 5493 \$67.00 Nonpriority Creditor's Name Po Box 3097 When was the debt incurred? **Opened 09/15** Bloomington, IL 61702 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney At T ☐ Yes 4.5 **Alliance Collection** Last 4 digits of account number 94N1 \$217.00 Nonpriority Creditor's Name Opened 3/01/08 Last Active P O Box 49 When was the debt incurred? 5/01/08 **Tupelo, MS 38802** Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Medical **Argent Healthcare Financial** 5869 \$12,435.00 4.6 Services/Fir Last 4 digits of account number Nonpriority Creditor's Name 7715 Nw 48 St Ste 100 When was the debt incurred? **Opened 07/15** Doral, FL 33166 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Career Education Corp ☐ Yes

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Case number (if know)

4.7 Arnold Scott Harris Last 4 digits of account number 0049 \$214.50 Nonpriority Creditor's Name 111 W Jackson Ste 600 When was the debt incurred? Chicago, IL 60604 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Illinois Tollway 4.8 **Associated Urological Specialists** Last 4 digits of account number 9380 \$187.16 Nonpriority Creditor's Name 12845 S. Cicero Ave., Suite 202 When was the debt incurred? 9/10/15 Alsip, IL 60803 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Π Yes Med Bill Other, Specify 4.9 AT & T Mobility Last 4 digits of account number 3299 \$85.07 Nonpriority Creditor's Name c/o AT&T Services, Inc. When was the debt incurred? One AT&T Way, Room 3A104 Bedminster, NJ 07921 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Services Performed ☐ Yes

Debtor 1 Ernestine Brown

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Debtor 1 Ernestine Brown Case number (if know) 4.1 **Cerastes LLC** 8362 \$300.00 Last 4 digits of account number 0 Nonpriority Creditor's Name c/o Weinstein Pinson & Riley When was the debt incurred? 2001 Western Ave, Ste 400 Seattle, WA 98121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card/Other ☐ Yes 4.1 City of Chicago \$1,000.00 7270 Last 4 digits of account number Nonpriority Creditor's Name **Department of Finance** When was the debt incurred? PO Box 88292 Chicago, IL 60680-1292 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Parking Tickets ☐ Yes 4.1 **Collection Proffesional** 7118 \$524.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 3/28/12 Last Active 723 1st St When was the debt incurred? 9/01/13 La Salle, IL 61301 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Southwest Allergy Assoc. S.C ☐ Yes

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Case number (if know)

Debto	Ernestine Brown		Case number (if know)	
4.1	Comed	Last 4 digits of account number	5070	\$191.38
3	Nonpriority Creditor's Name Collections 3 Lincoln Center	When was the debt incurred?		,
	Villa Park, IL 60181 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Collections		
4.1	Community Healthnet Nonpriority Creditor's Name	Last 4 digits of account number	1899	\$90.26
	1021 W. 5th Avenue Gary, IN 46402	When was the debt incurred?	12/17/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Med Bill		
4.1 5	Credit Cntrl Nonpriority Creditor's Name	Last 4 digits of account number	7588	\$796.00
	5757 Phantom Dr. Hazelwood, MO 63042	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	umber Street City State Zlp Code As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	·	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other, Specify Medical		

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Debto	Ernestine Brown		Case number (if know)	
4.1	Credit Control, LLC	Local Control Control	7588	\$796.60
6	Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?		φ190.00
	5757 Phantom Dr., Ste 330 Hazelwood, MO 63042	when was the debt incurred?	6/30/2014	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Med Bill		
4.1	Credit Management, LP	Last 4 digits of account number	5300	\$2,937.00
	Nonpriority Creditor's Name	_		
	4200 International Pkwy Carrollton, TX 75007	When was the debt incurred?	Opened 10/14 Last Active 06/14	
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Collection Phone - 1		
4.1	Cybrcollect	Last 4 digits of account number	4160	\$69.00
8	Nonpriority Creditor's Name			400.00
	Po Box 1145 2350 South Ave Ste La Crosse, WI 54601	When was the debt incurred?	Opened 9/01/09 Last Active 12/01/12	
	Number Street City State Zlp Code	As of the date you file, the claim		
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	g plans, and other similar debts		
	Yes	Returned Control Other. Specify Inactive	Check 01 Curves On Kedzie	

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Debtor 1 Ernestine Brown Case number (if know) 4.1 Cybrcollect 7818 \$25.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 3/01/09 Last Active Po Box 1145 2350 South Ave Ste When was the debt incurred? 12/01/12 La Crosse, WI 54601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Returned Check 01 Curves On Kedzie ☐ Yes Other. Specify Inactive 4.2 Grove Dental Associates, P.C. \$134.20 Last 4 digits of account number Nonpriority Creditor's Name 160 E. Boughton Road When was the debt incurred? Bolingbrook, IL 60440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Services Performed ☐ Yes 4.2 Illinois Bell Telephone Company \$151.89 2617 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Karen A. Cavagnaro Lead Paralegal One AT&T Way, Room 3A104 Bedminster, NJ 07921 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Services Performed** Other. Specify

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Debtor 1 Ernestine Brown Case number (if know) 4.2 Illinois Tollway 6477 \$1,053.50 Last 4 digits of account number 2 Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.2 Illinois Tollway 4785 \$1,859.00 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.2 Illinois Tollway 3247 \$4.218.50 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections

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Debtor 1 Ernestine Brown Case number (if know) 4.2 Illinois Tollway 6496 \$559.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.2 Illinois Tollway 4995 \$2,359.50 Last 4 digits of account number 6 Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? Downers Grove, IL 60515 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.2 Illinois Tollway 2494 \$1.268.50 Last 4 digits of account number Nonpriority Creditor's Name 2700 Ogden Ave When was the debt incurred? **Downers Grove, IL 60515** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collections

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Debtor	1 Ernestine Brown	Case number (if know)	
4.2 8	Jefferson Capital Systems LLC	Last 4 digits of account number	\$377.00
	Nonpriority Creditor's Name P.O. Box 7999 Saint Cloud, MN 56302-9617	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Payday Loan	
4.2	Loan By Phone of Illinois, LLC	Last 4 digits of account number 3449	\$313.75
	Nonpriority Creditor's Name 201 Keith Street, Suite 80 Cleveland, TN 37311	When was the debt incurred? 1/4/16	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Pay Day Loan	
4.3	LVNV Funding LLC	Last 4 digits of account number 2941	\$409.63
	Nonpriority Creditor's Name c/o Resurgent Capital Services P.O. Box 10587	When was the debt incurred?	
	Greenville, SC 29603-0587		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	

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Debtor 1 Ernestine Brown Case number (if know) 4.3 Matthew V. Dolce, D.D.S., P.C. \$404.40 Last 4 digits of account number Nonpriority Creditor's Name 1515 Sheridan Rd. 10/13/2013 to 2/20/2014 When was the debt incurred? Suite 19B Wilmette, IL 60091 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Dental Bill ☐ Yes 4.3 1836 \$200.00 Mcsi Inc Last 4 digits of account number Nonpriority Creditor's Name Opened 1/01/13 Last Active Po Box 327 When was the debt incurred? 3/01/13 Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 01 City Of Country Club Hills Ss ☐ Yes 4.3 \$200.00 Mcsi Inc 7870 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 8/01/12 Last Active Po Box 327 When was the debt incurred? 11/01/12 Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community lacksquare Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 01 City Of Country Club Hills Ss ☐ Yes

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Debtor 1 Ernestine Brown Case number (if know) 4.3 Mcsi Inc 4391 \$200.00 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 9/01/13 Last Active Po Box 327 When was the debt incurred? 11/01/13 Palos Heights, IL 60463 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 01 City Of Country Club Hills Ss ☐ Yes 4.3 **Municipal Collection** 4787 \$270.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 9/01/13 Last Active 3348 Ridge Road When was the debt incurred? 11/01/13 Lansing, IL 60438 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 04 City Of Calumet City R Other, Specify 4.3 **Municipal Collection** 3739 \$200.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 10/01/12 Last Active 3348 Ridge Road When was the debt incurred? 12/01/12 Lansing, IL 60438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 04 Village Of Dolton Rs ☐ Yes

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Debtor 1 Ernestine Brown Case number (if know) 4.3 **Municipal Collection of America** 3739 \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 3348 Ridge Road When was the debt incurred? 5/25/2012 Lansing, IL 60438 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Village of Dolton Rs ☐ Yes 4.3 **NCO Financial** 9817 \$1,716.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 10/01/13 Last Active 600 Holiday Plaza Suite 300 When was the debt incurred? 1/01/14 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 04 Illinois State Toll Hwy Author 4.3 **NCO Financial** 3566 \$1,430.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 9/01/13 Last Active 600 Holiday Plaza Suite 300 When was the debt incurred? 1/01/14 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No 04 Illinois State Toll Hwy Author ☐ Yes Other. Specify

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Case number (if know)

4.4 **NCO Financial** 0306 \$1,001.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 8/01/13 Last Active 600 Holiday Plaza Suite 300 When was the debt incurred? 11/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 04 Illinois State Toll Hwy Author ☐ Yes 4.4 **NCO Financial** \$786.00 7825 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/01/13 Last Active 600 Holiday Plaza Suite 300 When was the debt incurred? 10/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes 04 Illinois State Toll Hwy Author Other, Specify 4.4 **NCO Financial** 9164 \$643.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 8/01/13 Last Active 600 Holiday Plaza Suite 300 When was the debt incurred? 12/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 04 Illinois State Toll Hwy Author ☐ Yes

Debtor 1 Ernestine Brown

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Debtor 1 Ernestine Brown Case number (if know) 4.4 **Nco Financial Systems** 5541 \$3,789.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 1/30/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 5/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Illinois State Toll Hwy Author ☐ Yes 4.4 **Nco Financial Systems** \$929.00 2732 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/15/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 10/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Illinois State Toll Hwy Author** Other, Specify 4.4 **Nco Financial Systems** 1740 \$858.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/01/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 10/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Illinois State Toll Hwy Author ☐ Yes

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Case number (if know)

4.4 **Nco Financial Systems** 0748 \$786.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 4/10/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 7/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Illinois State Toll Hwy Author ☐ Yes 4.4 **Nco Financial Systems** 7469 \$643.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 6/17/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 9/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Collection Illinois State Toll Hwy Author** Other, Specify 4.4 \$572.00 **Nco Financial Systems** 8737 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 6/10/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 9/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Illinois State Toll Hwy Author ☐ Yes

Debtor 1 Ernestine Brown

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Debtor 1 Ernestine Brown Case number (if know) 4.4 **Nco Financial Systems** 1189 \$572.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 5/20/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 8/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Illinois State Toll Hwy Author ☐ Yes 4.5 **Nco Financial Systems** 0124 \$500.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 6/03/13 Last Active 600 Holiday Plaza Dr Ste When was the debt incurred? 9/01/13 Matteson, IL 60443 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Illinois State Toll Hwy Author** Other, Specify 4.5 no name on CR Liability 6535 \$233.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 02/16 Last Active 01/16 When was the debt incurred? Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt ☐ Yes

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Debtor 1 Ernestine Brown Case number (if know) 4.5 **Northern Resolution** 7535 \$675.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 5/01/13 Last Active Po Box 566 When was the debt incurred? 1/01/14 Amherst, NY 14226 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 12 Red Leaf Payday Loan ☐ Yes 4.5 Office of the Traffic Compliance Ad 4984 \$300.00 Last 4 digits of account number 3 Nonpriority Creditor's Name City of Blue Island When was the debt incurred? 13031 S Greenwood Ave Blue Island, IL 60406 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Collections Other. Specify 4.5 \$200.00 **Penn Credit Corporat** 2882 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/01/12 Last Active 916 South 14th Street When was the debt incurred? 1/01/14 Harrisburg, PA 17108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Village Of Sout ☐ Yes

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Debtor 1 Ernestine Brown Case number (if know) 4.5 **Photo Enfrocement Program** 2308 \$100.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 75 Remittance Dr. Suite 6658 When was the debt incurred? Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.5 **PPIL** 2401 \$297.08 Last 4 digits of account number 6 Nonpriority Creditor's Name 18 S. Michigan Ave 6th Floor When was the debt incurred? 7/10/15 to 8/7/15 Chicago, IL 60603-3200 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med Bill ☐ Yes 4.5 7 **QVC Studio Park** 7335 \$22.73 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2254 When was the debt incurred? West Chester, PA 19380 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Goods

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Debtor 1 Ernestine Brown Case number (if know) 4.5 **Region Recovery** 7216 \$105.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 1/01/09 Last Active 5252 Hohman Po Box 8000 When was the debt incurred? 3/01/09 Hammond, IN 46325 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify 4.5 Southwest Allergy Assoc. 0494 \$494.60 Last 4 digits of account number 9 Nonpriority Creditor's Name 5423 95th St. When was the debt incurred? **Opened 03/12** Oak Lawn, IL 60453 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent ☐ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Services Provided** Other. Specify 4.6 Speedy Cash 4203 \$106.86 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 780408 When was the debt incurred? Wichita, KS 67278 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Loan

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Debtor 1 Ernestine Brown Case number (if know) 4.6 Stellar Recovery Inc 9571 \$842.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 6/26/13 Last Active 4500 Salisbury Rd Ste 10 When was the debt incurred? 7/01/13 Jacksonville, FL 32216 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Comcast ☐ Yes 4.6 **Trident Asset Management** 7964 \$121.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 3/29/11 Last Active 5755 Northpoint Pkwy Ste When was the debt incurred? 6/01/12 Alpharetta, GA 30022 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Black Expressions** Other, Specify 4.6 Us Dept of Ed/GLELSI 8581 \$67,000.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 12/09 Last Active Po Box 7860 When was the debt incurred? 1/31/14 Madison, WI 53707 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ☐ Other. Specify **Educational**

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Debtor	Ernestine Brown		Case number (if know)						
4.6 4	Vision Finance	Last 4 digits of account numbe	, 5768	\$485.00					
	Nonpriority Creditor's Name								
	555 Michigan Ave Suite 204 La Porte, IN 46350	When was the debt incurred?	Opened 7/01/13 Last Active 9/01/13						
	Number Street City State Zlp Code	As of the date you file, the claim	n is: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	☐ Check if this claim is for a community								
	debt Is the claim subject to offset?								
	No	Debts to pension or profit-share	ing plans, and other similar debts						
	□Yes	Other. Specify Medical							
		— Other. Openiy							
Part 3	List Others to Be Notified About a De	ebt That You Already Listed							
is try have	his page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor nat you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection agency	here. Similarly, if you					
	and Address	On which entry in Part 1 or Part 2 did yo							
	ptance Now ptance Now Customer Service	Line 4.1 of (Check one):	Part 1: Creditors with Priority Unsecured Clair						
	leadquarters Dr		Part 2: Creditors with Nonpriority Unsecured	Claims					
Planc	o, TX 75024								
		Last 4 digits of account number							
	and Address	On which entry in Part 1 or Part 2 did yo							
Afni	Martin Luther King Dr		Part 1: Creditors with Priority Unsecured Clain						
	Martin Luther King Dr nington, IL 61701		Part 2: Creditors with Nonpriority Unsecured	Claims					
	····· g ·····, · <u>-</u> · · · · ·	Last 4 digits of account number							
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?						
	n's Creditor's Service Corp.		☐ Part 1: Creditors with Priority Unsecured Clair	ms					
	levere Drive, Suite 9		Part 2: Creditors with Nonpriority Unsecured						
North	brook, IL 60062	Last 4 digits of account number	, ,						
		Lact 1 digite of decount number							
	and Address of Chicago	On which entry in Part 1 or Part 2 did you Line 4.11 of (Check one):	<u> </u>						
	rnold Scott Harris PC		Part 1: Creditors with Priority Unsecured Clair						
	V Jackson St. Ste 600		Part 2: Creditors with Nonpriority Unsecured	Claims					
Chica	ago, IL 60604								
		Last 4 digits of account number							
	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?						
	t Management, LP		Part 1: Creditors with Priority Unsecured Clain						
	Bankruptcy ox 118288		Part 2: Creditors with Nonpriority Unsecured	Claims					
	ok 116266 olton, TX 75011								
	•	Last 4 digits of account number							
Name a	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?						
	ept of Ed/GLELSI		Part 1: Creditors with Priority Unsecured Clair	ms					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

■ Part 2: Creditors with Nonpriority Unsecured Claims

2401 International

Madison, WI 53704

Last 4 digits of account number

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Debtor 1 Ernestine Brown

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims	CI-	Towns and south's other debte was one the management	C.L.	•	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	78.45
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	78.45
					Total Claim
	6f.	Student loans	6f.	\$	67,000.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	55,838.70
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	122,838.70

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Fill in this infor	mation to identify your	case:		
Debtor 1	Ernestine Brown			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				Charle if this is an
(II KIIOWII)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Ginger Ridge Apartments
1954 Memorial Dr.
Calumet City, IL 60409

State what the contract or lease is for
One Year Lease \$905.00

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		Docume	HL Paue 43 U	u / 5	
Fill in this	information to identify your				
Debtor 1	Ernestine Brown				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb (if known)	oer				☐ Check if this is an amended filing
Official	Form 106H				Ç
Sched	ule H: Your Cod	ebtors			12/15
No Yes 2. With Arizona No. Yes 3. In Coluin line Form	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spourm 1, list all of your codebt 2 again as a codebtor only i	lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	e with you at the time? spouse as a codebtor tor or cosigner. Make s	y? (Community property ngton, and Wisconsin.) if your spouse is filing sure you have listed th	y states and territories include g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
(Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	۵
	Name			_ ☐ Schedule E/F, li	
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code	_	
				Odrada D. Fa	
3.2	Name			_ ☐ Schedule D, line ☐ Schedule E/F, li	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

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Eill	in this information to identify	v vour oo									
		stine Br									
	btor 2 ouse, if filing)					_					
	ited States Bankruptcy Cour	rt for the:	NORTHERN DISTRIC	CT OF ILLINOIS							
	se number nown)								ed filing ent showin	g postpetition	
0	fficial Form 106I	<u> </u>					ī	MM / DD/ Y	YYYY		
S	chedule I: Your	· Inco	ome								12/1
spo atta	plying correct information use. If you are separated a ch a separate sheet to this rt 1: Describe Emplo Fill in your employment	and you s form. (r spouse is not filing wi	th you, do not inc	lude infor	mati	on abou	it your spe number (if	ouse. If me known). A	ore space is Answer every	needed,
	information.			Debtor 1				Debtor 2		iling spouse	
	If you have more than one attach a separate page wi information about addition	ith	Employment status	■ Employed□ Not employed	■ Employed □ Not employed						
	employers.		Occupation UK Hopper								
	Include part-time, seasona self-employed work.	al, or	Employer's name	Employer's name Avant Credit							
	Occupation may include s or homemaker, if it applies		Employer's address	222 N. LaSalle Chicago, IL 60	•	170	00				
			How long employed the	here? 4 Moi	nths			_			
Pa	rt 2: Give Details Abo	out Mon	thly Income								
	imate monthly income as our separate		te you file this form. If	you have nothing to	report for	any	line, writ	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse to space, attach a separate s			ombine the informa	tion for all e	empl	oyers fo	r that perso	on on the li	nes below. If	you need
							For De	ebtor 1		btor 2 or ing spouse	
2.	List monthly gross wage deductions). If not paid m				2.	\$		2,830.23	\$	N/A	-
3.	Estimate and list month	ly overti	me pay.		3.	+\$		0.00	+\$	N/A	-
4.	Calculate gross Income.	. Add lin	e 2 + line 3.		4.	\$	2,8	30.23	\$	N/A	

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Debt	or 1	Ernestine Brown	-	Cas	e number (<i>if known</i>)			
				Fo	or Debtor 1	For D	ebtor 2 or	
							iling spouse	
	Cop	by line 4 here	4.	\$_	2,830.23	\$	N/A	<u>\</u>
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	294.45	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	<u></u>
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	<u></u>
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	<u>.</u>
	5g.	Union dues	5g.	\$	0.00	\$	N/A	\
	5h.	Other deductions. Specify: Dental	5h.	+ \$	19.50	+ \$	N/A	
		Medical		\$	101.83	\$	N/A	<u> </u>
		Vision		\$	6.83	\$	N/A	<u> </u>
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	422.61	\$	N/A	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,407.62	\$	N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	¢	N/ /A	
	Oh	Interest and dividends		φ_ \$	0.00	\$	N/A	_
	8b. 8c.		8b.	Ф_	0.00	ъ	N/A	<u>\</u>
	oc.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.		0.00	\$	N/A	_
	8e.	Social Security	8e.		0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	<u> </u>
	8g.	Pension or retirement income	8g.	_	0.00	\$	N/A	<u>\</u>
	8h.	Other monthly income. Specify:	_ 8h.	+ \$_	0.00	+ \$	N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$	N/	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	S	2,407.62 + \$_		N/A = \$	2,407.62
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	deper		•		hedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$	2,407.62
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?				Combi month	Inea Iy income
		Ves Evolain:						

Official Form 106I Schedule I: Your Income page 2

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Fill	in this informa	tion to identify yo	ur case:					
	tor 1	Ernestine Br				Chec	ck if this is: An amended filing	
	otor 2 ouse, if filing)						· ·	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	IOIS	-	MM / DD / YYYY	
	e numbe r nown)							
		rm 106J	_					
		J: Your I			CII ()			12/1
info	ormation. If m		eded, atta	If two married people and the control of the contro				
Par		ibe Your House	hold					
1.	Is this a joir ■ No. Go to		n a conar	ata hausahald?				
	□ N	0	·	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have	e dependents?	□No					
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		18	□ No ■ Yes □ No
								☐ Yes ☐ No ☐ Yes
								□ No □ Yes
3.	expenses of	enses include f people other th d your depender	nan ┌	No Yes				
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance and		government assistance is luded it on Schedule I: Y			Your exp	enses
4.		or home ownersland any rent for the		ses for your residence. r lot.	Include first mortgage	e 4. \$	S	930.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	S	0.00
	4b. Prope	rty, homeowner's				4b. \$	S	20.00
				pkeep expenses		4c. \$		0.00
5.		owner's associati nortgage payme		dominium dues o ur residence, such as ho	ome equity loans	4d. \$ 5. \$		0.00

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ebtor 1 Ern	nestine Brown	Case num	ber (if known)	
Utilities:				
6a. Elec	ctricity, heat, natural gas	6a.	\$	100.00
6b. Wat	ter, sewer, garbage collection	6b.	\$	0.00
6c. Tele	ephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
6d. Oth	er. Specify:	6d.	\$	0.00
. Food and	l housekeeping supplies	7.	\$	250.00
. Childcare	and children's education costs	8.	\$	0.00
Clothing,	laundry, and dry cleaning	9.	\$	20.00
0. Personal	care products and services	10.	\$	25.00
1. Medical a	and dental expenses	11.	\$	30.00
2. Transport	tation. Include gas, maintenance, bus or train fare.			400.00
	clude car payments.	12.	·	180.00
	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. Charitable	e contributions and religious donations	14.	\$	30.00
5. Insurance				
	clude insurance deducted from your pay or included in lines 4 or 20.	45-	c	2.22
	insurance	15a.	·	0.00
	alth insurance	15b.	·	0.00
	nicle insurance	15c.	·	223.00
	er insurance. Specify:	15d.	\$	0.00
Specify:	o not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	nt or lease payments:			
	payments for Vehicle 1	17a.		0.00
	payments for Vehicle 2	17b.	*	0.00
	er. Specify:	17c.	·	0.00
	er. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report as		c	0.00
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	
	ments you make to support others who do not live with you.	40	\$	0.00
Specify:	I was now to a version of the local design of the form of the Cab	19.	Incomo	
	Il property expenses not included in lines 4 or 5 of this form or on Sch rtgages on other property	20a.		0.00
	al estate taxes	20b.	· ·	0.00
	perty, homeowner's, or renter's insurance	20c.	•	0.00
	intenance, repair, and upkeep expenses	20d.		0.00
	meowner's association or condominium dues	20d. 20e.	·	
			φ +\$	0.00
I. Other: Sp	ecity:		+\$	0.00
2. Calculate	your monthly expenses			
22a. Add I	lines 4 through 21.		\$	2,108.00
22b. Copy	v line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add I	line 22a and 22b. The result is your monthly expenses.		\$	2,108.00
			· —	_,:00:00
	your monthly net income.		_	
	by line 12 (your combined monthly income) from Schedule I.	23a.		2,407.62
23b. Cop	by your monthly expenses from line 22c above.	23b.	-\$	2,108.00
00. 0:	design of the second se			
	otract your monthly expenses from your monthly income.	23c.	\$	299.62
The	e result is your monthly net income.	200.	¥	200.02

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: The car insurance cost of \$223.00 is for a car owned by a third party that the debtor uses and maintains possession of.

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Fill in this infor	mation to identify your	case.			
Debtor 1	Ernestine Brown	ouse.			
Debior	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an amended filing
Official For		ın Individual	Dobtor's Sa	shodulos	
<u>Declara</u>	tion About a	iii iiiaiviaaai	Deptor 3 Oc	Jiicaaics	12/15
years, or both. 1	is U.S.C. §§ 152, 1341, 1 In Below			in fines up to \$250,000, or im	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out l	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, gnature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules file	ed with this declaration and	
X /s/ Frn	nestine Brown		X		
	tine Brown		Signature of	f Debtor 2	
	ire of Debtor 1		-		
Date	July 5, 2016		Date		

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Fill i	n this inform	nation to identify you	r case:			
Debt	or 1	Ernestine Brown	1			
		First Name	Middle Name	Last Name		
Debt (Spous	or 2 se if, filing)	First Name	Middle Name	Last Name		
	-	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILL INOIS		
Office	o States Dai	ikiupicy Court for the.	- NORTHERN DIOTRIOT	or illinoid		
Case (if known	e number wn)				-	theck if this is an mended filing
	icial Foi tement		Affairs for Indivi	duals Filing for B	ankruptcy	4/16
nforr numb	mation. If mover (if known	ore space is needed, i). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup additional pages, write you	
Part	<u> </u>		rital Status and Where You	Lived Before		
1. \	wnat is your	current marital statu	S?			
[☐ Married☐ Not mare	ried				
2. I	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
 	■ No □ Yes. List	t all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
I I	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explain	n the Sources of You	r Income			
F	Fill in the tota	I amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once un		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Dalitan 4		Dalifa a 0	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
	•	of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$15,644.43	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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					Debtor 1					Deb	tor 2			
						of income that apply.	(be	ross income efore deduct clusions)			rces of in			Gross income (before deductions and exclusions)
	last cal nuary 1		ar year: ecember 3	31, 2015)	■ Wages bonuses,	s, commissions, tips		\$24	1,290.00		☐ Wages, commissions, bonuses, tips			
					☐ Opera	ting a business					☐ Operating a business			
			ar year bef ecember 3		■ Wages bonuses,	s, commissions, tips		\$3	5,457.00		Vages, cor uses, tips	nmission	S,	
					☐ Opera	ting a business					Operating a	busines	S	
Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, unemploymer and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details.														
					Debtor 1					Deh	tor 2			
						of income pelow.	ea (be	ross income ch source efore deduct clusions)		Sou	rces of in-			Gross income (before deductions and exclusions)
Par	t 3: L	_ist (Certain Pay	ments You	Made Befo	ore You Filed for	Bankı	ruptcy						
6.	□ No	es.	Neither De individual puring the subject to Debtor 1 o	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o	ebtor 2 ha personal, f re you filed each credito editor. Do n payments t on 4/01/19 r both have re you filed	amily, or househo for bankruptcy, di or to whom you pai	Imer of ld purpled do not some some some some some some some some	debts. Conspose." pay any created of \$6,425 and domestic sunkruptcy caser that for casedebts.	ditor a total * or more in upport oblig se. es filed on	I of \$6 in one pations or afte	.425* or moor pa or more pa , such as c	ore? yments a hild supp of adjustr	and the	(8) as "incurred by an e total amount you d alimony. Also, do
			□ Yes	List below e	ach credito									creditor. Do not clude payments to ar
	Credit	or's	Name and	Address		Dates of payme	ent	Total a	amount paid	Am	ount you still owe	Was t	his pa	nyment for

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7.	Insiders include your relatives; any general particles of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	irtners; relatives of any generation, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a gener ny managing a	al partner; corporations agent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		yments or transfer a	any property on a	ccount of a d	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankruptor. List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					t or custody
	Case number					
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below. No. Go to line 11.		erty repossessed, f	oreclosed, garnis	shed, attache	d, seized, or levied?
	Yes. Fill in the information below.					V 1 (1
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happene	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No ☐ Yes. Fill in the details.		cluding a bank or fir	nancial institutior	n, set off any	amounts from your
	Creditor Name and Address	Describe the action th	e creditor took		action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a No Yes		erty in the possess	taker		efit of creditors, a
Pai	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gif	ts with a total value	of more than \$60	00 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to an No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other or gambling?	Value
No	Value
Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other contributed	
more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other	
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other	
	r disaste
■ No	
☐ Yes. Fill in the details.	
	of property
how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	lost
Part 7: List Certain Payments or Transfers	
consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details.	
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred or transfer was made	Amount of payment
Swanson & Desai, LLC Attorney Fees \$320.00 (\$310.00 Filing 7/1/2016 670 W Hubbard Fee and \$10.00 for costs) Suite 202 Chicago, IL 60654 kc@chicagobankruptcyattorney.com	\$320.00
Access Counseling Credit Counseling \$14.95 7/3/2016 633 W 5th Street Suite 26001 Los Angeles, CA 90071	\$14.95
 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. 	ne who

Person Who Was Paid

Address

Description and value of any property

transferred

Amount of

payment

Date payment or transfer was

made

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Debtor 1 Ernestine Brown

18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details.	iness or financial affa as security (such as t	nirs? he granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payment	e any property or is received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		y property to a se	elf-settled t	rust or similar device o	f which you are a
	Name of trust	Description and v	alue of the prope	rty transfe	rred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No	ther financial accour	nts; certificates o			, ,
	Yes. Fill in the details.					
		ast 4 digits of ccount number	Type of accoun instrument	c	ate account was losed, sold, noved, or ransferred	Last balance before closing or transfer
21. Do you now have, or did you have within 1 year before you filed for cash, or other valuables?			bankruptcy, any	safe depos	sit box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution	Who else had acc	ess to it?	escribe the	e contents	Do you still
	Address (Number, Street, City, State and ZIP Code)	Address (Number, State and ZIP Code)	treet, City,			have it?
22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?				/?		
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		escribe the	e contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Inclu	ude any property	you borrow	ved from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the	e property	Value
Par	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Ernestine Brown**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or	similar term.					
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ntal law?			
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Have you been a party in any judicial or adminis	strative proceeding under any envi	ronmental law? Include settlements a	nd orders.			
	■ No						
	☐ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	t 11: Give Details About Your Business or Con	nnections to Any Business					
27.	Within 4 years before you filed for bankruptcy.	did vou own a business or have an	v of the following connections to any	business?			
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	■ No. None of the above applies. Go to Part 12.						
	Yes. Check all that apply above and fill in the details below for each business.						
		escribe the nature of the business	Employer Identification number				
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper	Do not include Social Security r	iumber of frint.			
28.	Within 2 years before you filed for bankruptcy,	did you give a financial statement t	Dates business existed o anyone about your business? Inclu	de all financial			
	institutions, creditors, or other parties.	. •					
	No No						
	Yes. Fill in the details below. Name Da	ate Issued					
	Address (Number, Street, City, State and ZIP Code)	110 133 46 4					
Dav	440: Ciam Dalaur						

Part 12: Sign Below

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Debtor 1 Ernestine Brown

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Ernestine Brown	
Ernestine Brown Signature of Debtor 1	Signature of Debtor 2
Date _July 5, 2016	Date
Did you attach additional	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to p	ay someone who is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice. Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section

726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.

☑ The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:

- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - All fees paid prior to the filing of the case are deposited into the attorney's general account and are considered an advanced payment retainer due to the nature of the services provided by counsel. Services provided by Debtor's counsel in preparation of the petition and costs associated with the filing of the case make it more Services provided by Debtor's counsel in preparation of the petition and costs associated with the filing of the case make it more efficient for Debtor and the Attorney to enter into and advanced payment retainer. Debtor's counsel reserves the right to refuse to enter into a security retainer due to the up-front costs associated with filing a Chapter 13 Bankruptcy. If any portion of the retainer is not considered earned or required for expenses it will be refunded to the client. efficient for Debtor and the Attorney to enter into and advanced payment retainer. Debtor's counsel reserves the right to refuse to enter into a security retainer due to the up-front costs associated with filing a Chapter 13 Bankruptcy. Debtor's counsel will apply the retainer to costs associated to the filing of the case and then attorney fees. If any portion of the retainer is not considered earned or required for expenses it will be refunded to the client.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$320.00

toward the flat fee, leaving a balance due of \$3,680.00; and \$50.00 for expenses,

leaving a balance due for the filing fee of \$310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: <u>July 1, 2016</u>	
Signed:	
/s/ Ernestine Brown	/s/ Mehul D. Desai
Ernestine Brown	Mehul D. Desai
	Attorney for the Debtor(s)
Debtor(s)	
Do not sign this agreement if the amounts a	re blank. Local Bankruptcy Form 23c

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B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In r	e Ernestine Brown		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DE	CBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fibe rendered on behalf of the debtor(s) in contemplation	lling of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered	or to
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have receive			320.00	
				3,680.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person	unless they are mem	pers and associates of my law	v firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the results				. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy of	ase, including:	
	a. Analysis of the debtor's financial situation, and rerb. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of credd. [Other provisions as needed]	tatement of affairs and plan which	may be required;		
6.	By agreement with the debtor(s), the above-disclosed	fee does not include the following	service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for	payment to me for re	epresentation of the debtor(s)	in
١.	July 5, 2016	/s/ Mehul D. Desa	i		
_	Date	Mehul D. Desai			
		Signature of Attorne Swanson & Desa	,		
		670 W Hubbard	, ===		
		Suite 202 Chicago, IL 60654	İ		
		312-666-7882 Fa			
		kc@chicagobank		m	
		Name of law firm			

United States Bankruptcy Court Northern District of Illinois

In re	Ernestine Brown		Case No.	
		Debtor(s)	Chapter 13	
	VI	ERIFICATION OF CREDITOR M	MATRIX	
		Number of	f Creditors:	73
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	itors is true and correct	to the best of my
	July 5, 2016	/s/ Ernestine Brown		

Acceptance Now 5501 Headquarters Dr Plano, TX 75024

Acceptance Now Customer Service 501 Headquarters Dr Plano, TX 75024

Advocate Christ Medical CEnter P.O. Box 4256 Carol Stream, IL 60197

Advocate Medical Croup PO box 92523 Chicago, IL 60675-2523

Afni Po Box 3097 Bloomington, IL 61702

Afni 1310 Martin Luther King Dr Bloomington, IL 61701

Alliance Collection P O Box 49 Tupelo, MS 38802

Argent Healthcare Financial Services/Fir 7715 Nw 48 St Ste 100 Doral, FL 33166

Arnold Scott Harris 111 W Jackson Ste 600 Chicago, IL 60604

Associated Urological Specialists 12845 S. Cicero Ave., Suite 202 Alsip, IL 60803

AT & T Mobility c/o AT&T Services, Inc. One AT&T Way, Room 3A104 Bedminster, NJ 07921 Automotive Credit Corp 26261 Evergreen Road Southfield, MI 48076

Automotive Credit Corp Michael Andrews & Assoc. 26261 Evergreen Rd. Suite 350 Southfield, MI 48076

Baron's Creditor's Service Corp. 155 Revere Drive, Suite 9 Northbrook, IL 60062

Cerastes LLC c/o Weinstein Pinson & Riley 2001 Western Ave, Ste 400 Seattle, WA 98121

City of Chicago Department of Finance PO Box 88292 Chicago, IL 60680-1292

City of Chicago c/o Arnold Scott Harris PC 111 W Jackson St. Ste 600 Chicago, IL 60604

Collection Proffesional 723 1st St La Salle, IL 61301

Comed Collections 3 Lincoln Center Villa Park, IL 60181

Community Healthnet 1021 W. 5th Avenue Gary, IN 46402

Credit Cntrl 5757 Phantom Dr. Hazelwood, MO 63042

Credit Control, LLC 5757 Phantom Dr., Ste 330 Hazelwood, MO 63042

Credit Management, LP 4200 International Pkwy Carrollton, TX 75007

Credit Management, LP Attn: Bankruptcy Po Box 118288 Carrolton, TX 75011

Cybrcollect Po Box 1145 2350 South Ave Ste La Crosse, WI 54601

Cybrcollect Po Box 1145 2350 South Ave Ste La Crosse, WI 54601

Grove Dental Associates, P.C. 160 E. Boughton Road Bolingbrook, IL 60440

Illinois Bell Telephone Company Karen A. Cavagnaro Lead Paralegal One AT&T Way, Room 3A104 Bedminster, NJ 07921

Illinois Tollway 2700 Ogden Ave Downers Grove, IL 60515

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Illinois Tollway 2700 Ogden Ave Downers Grove, IL 60515 Illinois Tollway 2700 Ogden Ave Downers Grove, IL 60515

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Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Jefferson Capital Systems LLC P.O. Box 7999 Saint Cloud, MN 56302-9617

Loan By Phone of Illinois, LLC 201 Keith Street, Suite 80 Cleveland, TN 37311

LVNV Funding LLC c/o Resurgent Capital Services P.O. Box 10587 Greenville, SC 29603-0587

Matthew V. Dolce, D.D.S., P.C. 1515 Sheridan Rd. Suite 19B Wilmette, IL 60091

Mcsi Inc Po Box 327 Palos Heights, IL 60463

Mcsi Inc Po Box 327 Palos Heights, IL 60463

Mcsi Inc Po Box 327 Palos Heights, IL 60463

Municipal Collection 3348 Ridge Road Lansing, IL 60438 Municipal Collection 3348 Ridge Road Lansing, IL 60438

Municipal Collection of America 3348 Ridge Road Lansing, IL 60438

NCO Financial 600 Holiday Plaza Suite 300 Matteson, IL 60443

NCO Financial 600 Holiday Plaza Suite 300 Matteson, IL 60443

NCO Financial 600 Holiday Plaza Suite 300 Matteson, IL 60443

NCO Financial 600 Holiday Plaza Suite 300 Matteson, IL 60443

NCO Financial 600 Holiday Plaza Suite 300 Matteson, IL 60443

Nco Financial Systems 600 Holiday Plaza Dr Ste Matteson, IL 60443

Nco Financial Systems 600 Holiday Plaza Dr Ste Matteson, IL 60443

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no name on CR Liability

Northern Resolution Po Box 566 Amherst, NY 14226

Office of the Traffic Compliance Ad City of Blue Island 13031 S Greenwood Ave Blue Island, IL 60406

Penn Credit Corporat 916 South 14th Street Harrisburg, PA 17108

Photo Enfrocement Program 75 Remittance Dr. Suite 6658 Chicago, IL 60675

PPIL 18 S. Michigan Ave 6th Floor Chicago, IL 60603-3200

QVC Studio Park P.O. Box 2254 West Chester, PA 19380 Region Recovery 5252 Hohman Po Box 8000 Hammond, IN 46325

Southwest Allergy Assoc. 5423 95th St. Oak Lawn, IL 60453

Speedy Cash P.O. Box 780408 Wichita, KS 67278

Stellar Recovery Inc 4500 Salisbury Rd Ste 10 Jacksonville, FL 32216

Trident Asset Management 5755 Northpoint Pkwy Ste Alpharetta, GA 30022

Us Dept of Ed/GLELSI Po Box 7860 Madison, WI 53707

Us Dept of Ed/GLELSI 2401 International Madison, WI 53704

Vision Finance 555 Michigan Ave Suite 204 La Porte, IN 46350